IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

CAO

Examiner:

Suzette Jamie Jackson

rial No.:

10/070,289

Group Art Unit:

3738

Filed:

July 15, 2002

Docket:

13935.0001USWO

Confirmation

4609

Notice of Allow.

February 4, 2005

No.:

Date:

Due Date:

May 4, 2005

Title:

A MAMMARY PROSTHESIS MADE OF POLYACRYLAMIDE HYDROGEL

CERTIFICATE UNDER 37 CFR 1.8:

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Name: Mele Caufman

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Name: Michael D. Schumann

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MDS/mkc

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~_	. 010001	2000 20				March 18, 2005			(Date)	
	APPLICATION NO.	FILING DATE	FIRST NA		D INVENT	ror	ATTORNEY DOCI	KET NO.	CONFIRMATION NO.	
	10/070,289 07/15/2002			Mengi	un Cao		13935.1US\		4609	
	TITLE OF INVENTION: MAMMARY PROSTHESIS MADE OF POLYACRYLAMIDE HYDROGEL									
	APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PU	BLICATION FEE	TOTAL FEE(S)	DUE	DATE DUE	
	nonprovisional YES		\$700			\$0	\$700		05/04/2005	
	EXAMINER		ART UNIT		CL.	LASS-SUBCLASS				
	JACKSON, SU	3738			623-008000					
•	CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is NO			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment.						
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	Authorized Signature	IIIII Man			Date March 18, 2005					
	Typed or printed name Michael D. Schumann			Registration No. 30,422						
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